

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F01000002494

FILED
Apr 19, 2002 8:00 AM
Secretary of State

Entity Name: E-STAFF OF DELAWARE, INC.

Current Principal Place of Business:

3701 MARKET STREET, SUITE 240
PHILADELPHIA, PA 19104

New Principal Place of Business:

Current Mailing Address:

3701 MARKET STREET, SUITE 240
PHILADELPHIA, PA 19104

New Mailing Address:

FEI Number: 52-2258634

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GARDNER, ANNETTE M
Address: 6551 PARK OF COMMERCE BLVD., N.W. #200
City-St-Zip: BOCA RATON, FL 33487

Title: V () Delete
Name: BOSHART, JOSEPH A
Address: 6551 PARK OF COMMERCE BLVD., N.W. #200
City-St-Zip: BOCA RATON, FL 33487

Title: VT () Delete
Name: HENSEL, EMIL
Address: 6551 PARK OF COMMERCE BLVD., N.W. #200
City-St-Zip: BOCA RATON, FL 33487

Title: S () Delete
Name: RUBIN, STEPHEN W
Address: 1585 BROADWAY, 22ND FLOOR
City-St-Zip: NEW YORK, NY 10036

Title: AS () Delete
Name: IVES, RICHARD
Address: 6551 PARK OF COMMERCE BLVD., N.W. #200
City-St-Zip: BOCA RATON, FL 33487

Title: D () Delete
Name: LIVERS, LORI
Address: 535 MADISON AVENUE
City-St-Zip: NEW YORK, NY 100224299

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANNETTE M. GARDNER

PD

04/19/2002

Electronic Signature of Signing Officer or Director

Date